I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EM203504087US, on the date shown below in an envelope addressed to: MS Issue Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Dated: February 5, 2008

Signature: Autom
Barbara A. Saltsman)

Docket No.: 283-392.12

(PATENT)

### IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:

Robert Soule et al.

Application No.: 10/669,894

Confirmation No.: 2236

Examiner: U. C. N. Le

Filed: September 23, 2003

Art Unit: 2876

For: OLD TITLE: Reprogramming System

Including Reprogramming Symbol **NEW TITLE**: Symbol Generator For

Generating Programming Bar Code Symbols

## COMMENTS ON STATEMENT OF REASONS FOR ALLOWANCE

MS Issue Fee Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

#### **INTRODUCTORY COMMENTS**

Comments begin on page 2 of this paper.

Docket No.: 283-392.12

Regarding the Statement of Reasons For Allowance of November 5, 2007, the applicants note that the elements listed in the Examiner's statement are not recited in combination in any individual claim. If the Examiner's position is that the elements noted in the Examiner's statement must be recited in combination in a certain claim for the claim to be allowable, the Examiner is respectfully requested to withdraw the allowance and present a new non-final office action formalizing such a position. Otherwise, the record will reflect that each claim was allowed for the recital of one or more combination of elements actually recited therein.

**COMMENTS** 

Also, regarding claim 73, applicants cannot identify any element of the claim related to the element noted by the Examiner relative to claim 73. If the Examiner's position is that the listed elements of the statement as to claim 73 must be present in claim 73 for claim 73 to be allowable, the Examiner is respectfully requested to withdraw allowance and to present a new non-final office action substantiating such a position. Otherwise, the record will show that each claim has been allowed for the recital of one or more combination of elements actually recited therein.

If the Examiner believes that contact with applicants' attorney would be advantageous toward the disposition of this case, the Examiner is herein requested to call applicants' representative at the phone number listed below.

The Commissioner is hereby authorized to charge any additional fees associated with this communication or credit any overpayment to deposit Account No. 50-0289.

Docket No.: 283-392.12

Dated: February 5, 2008

Respectfully submitted,

George S. Blasiak

Registration No.: 37,283

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Suite 300

Syracuse, New York 13202

(315) 425-9000

Customer No.: 20874

GSB/bs

PTO/SB/21 (01-08)

Approved for use through 01/31/2008. OMB 0651-0031

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# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

FEB 0 5 2008

 Application Number
 10/669,894-Conf. #2236

 Filing Date
 September 23, 2003

 First Named Inventor
 Robert Soule

 Art Unit
 2876

 Examiner Name
 U. C. N. Le

 Attorney Docket Number
 283-392.12

Total Number of Pages in This Submission 18 ENCLOSURES (Check all that apply) After Allowance Communication x | Fee Transmittal Form x Drawing(s) Appeal Communication to Board of Fee Attached Licensing-related Papers Appeals and Interferences Appeal Communication to TC Amendment/Reply Petition (Appeal Notice, Brief, Reply Brief) Petition to Convert to a x After Final Proprietary Information Provisional Application Power of Attorney, Revocation Affidavits/declaration(s) Status Letter Change of Correspondence Address Other Enclosure(s) (please Extension of Time Request Terminal Disclaimer Identify below): PTOL 85 Part B Fee(s) Transmittal Express Abandonment Request Request for Refund (1 pg.), Replacement Drawings (4 pgs.), Annotated Drawings, (4 Information Disclosure Statement CD, Number of CD(s) pgs.), Comments on Statement of Reasons for Allowance (3 pgs.), Certified Copy of Priority Landscape Table on CD Certificate of Express Mail and Document(s) Reply to Missing Parts/ Remarks Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name MARJAMA MULDOON BLASIAK & SULLIVAN LLP Signature Doch SE Printed name George S. Blasiak

Transmittal
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Dated: February 5, 2008

February 5, 2008

Date

Signature;

(Barbara A. Saltsman)

37,283

FEB 0 5 2008

PTO/SB/17 (10-07)
Approved for use through 06/30/2010. OMB 0651-0032
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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2008					Complete if Known					
					Application Number 10/669,894-C			onf. #2236		
							September 23	September 23, 2003		
							Robert Soule			
							U. C. N. Le			
Applicant claims small entity status. See 37 CFR 1.27					7 tre Grite		2876			
TOTAL AMOUNT OF PAYMENT (\$) 1,746.00 Attorney Docket No. 283-392.12										
METHOD OF PAYMENT (check all that apply)										
Check Credit Card Money Order None Other (please identify):										
X Deposit Account Deposit Account Number: 50-0289 Deposit Account Name: Marjama Muldoon Blasiak & Sullivan LLP										
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)										
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee										
x Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17										
FEE CALCULATION										
1. BASIC FILING, SEARCH, AND EXAMINATION FEES										
FILING FEES SEARCH FEES EXAMINATION FEES										
Application T	уре	Fee (\$)	Small Entity Fee (\$)	Fee (\$	Small Entity Fee (\$)	Fee (\$	Small Entity Fee (\$)	Fees Paid (\$)		
Utility		310	155	510	255	210	105			
Design		210	105	100	50	130	65			
Plant		210	105	310	155	160	80			
Reissue		310	155	510	255	620	310			
Provisional		210	105	0	0	0	0			
2. EXCESS CLAIM FEES  Small Entity Fee Description Fee (\$) Fee (\$)										
Fee Description Each claim over 20 (including Reissues)										
Each claim over 20 (including Reissues) 50 25 Each independent claim over 3 (including Reissues) 210 105										
Multiple dependent claims 370 185										
Total Claims										
HP = highest number of total claims paid for, if greater than 20.  Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)										
Indep. Claims Extra Claims Fee (\$) Fee F					raid (\$)					
HP = highest number of independent claims paid for, if greater than 3.										
3. APPLICATION SIZE FEE										
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer										
listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).										
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)										
100 = /50 = (round <b>up</b> to a whole number) x =										
4. OTHER FEE(S) Fees Paid (\$)										
Non-English Specification, \$130 fee (no small entity discount)										
Other (e.g., late filing surcharge): 1501 Utility issue fee 1,440.00 1504 Publication fee for early, voluntary, or normal 300.00										
8001 Printed copy of patent w/o color 6.00										
SUBMITTED BY										
Signature	25	? (3	ler		Registration No. (Attorney/Agent)	37,283	Telephone	(315) 425-9000		
Name (Print/Type)	George S.	Blasiak			·		Date	February 5, 2008		
Fee Transmittal										
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	P.O. Box 1450, Alexandria, VA 22313-1450.									
Dated: February 5, 2008 Signature: Dated: - Altona Barbara A. Saltsman)										